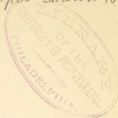


Paper March 18<sup>th</sup> 1876

An  
Inaugural Dissertation

on

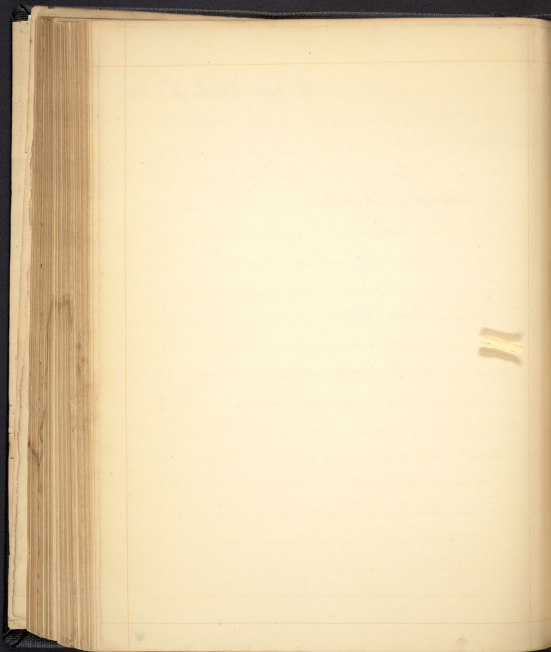
Dysentery

By

Isaac Hall

of

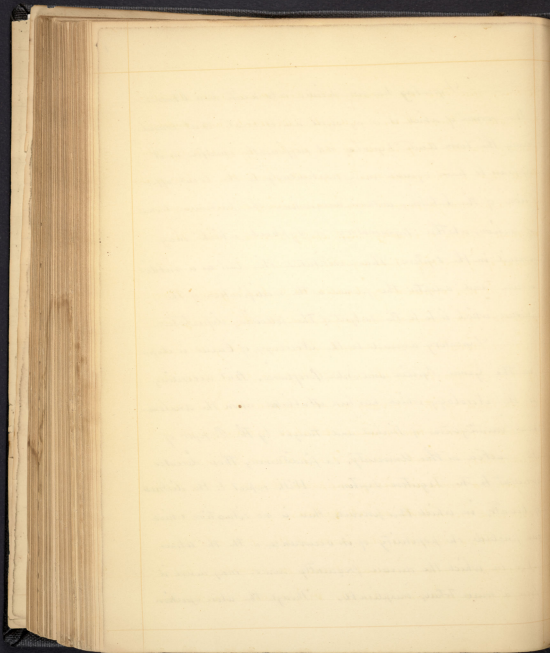
North Carolina



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Dysentery has been divided into Acute and Chronic the former of which it is my object now to treat. But considering the term Acute Dysentery not sufficiently specific, as it appears to have reference more particularly to the local affection of the Intestines, without designating the particular kind of action, whether Inflammatory or Typhoid which may prevail in the System, I have instituted this last as a subdivision and adopted the former as the modification of the disease which is to be the subject of the following dissertation.

Dysentery according to the Nosology of Cullen is placed in the Genus *Pyrexia* and order *Profluxus*. But according to the Nosology which has been established upon the Anatomical investigations of Sæmisch and taught by the Professor of the practice in this University, we find it among those diseases incident to the Digestive System. With respect to the districts of country in which this prevails, there is no situation which can preclude the possibility of its occurrence, as the the Atmosphere in which the disease frequently arises, may derive it from a source totally unaplicable. Though the above question

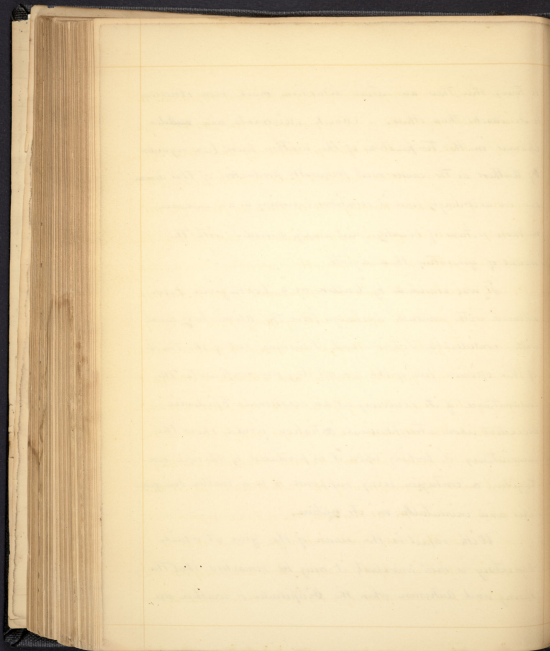




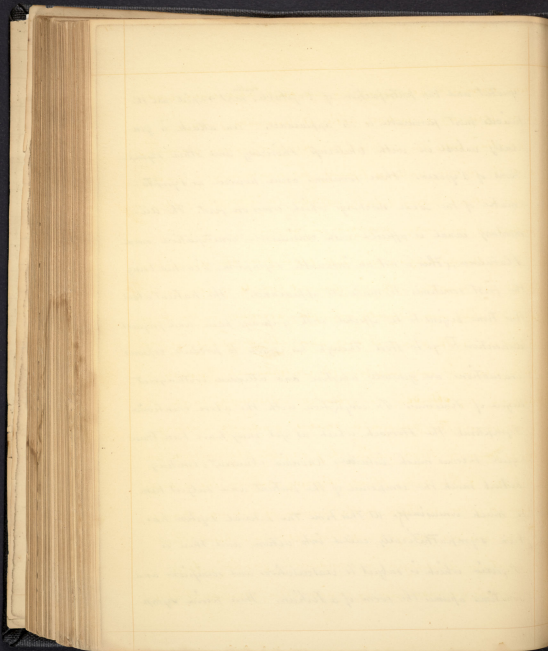
be true, still there are certain situations much more obnoxious  
to its attacks than others. Marsh climates and sudden  
changes in the temperature of the weather have been regarded  
by Authors as the causes most frequently productive of this disease  
and are accordingly found it sometimes occurring as an endemic  
in those sections of country, most amply provided with the  
means of generating these agents.

It was considered by Cullen as a contagious Fever  
attended with unusual discharges from the alimentary canal  
with considerable Torsiona and Tenismus, but of the truth  
of this opinion few of the present day are confident. The  
circumstance of its occurring as an occasional Epidemic  
dependent upon atmospheric variation would show the  
inimistancy of looking upon it as produced by specific con-  
-tagion, a contagion being supposed to be a matter sui gen-  
-eris and inimitable in its nature.

With respect to the season of the year at which  
Dysentery is most prevalent, it may be remarked that the  
Spring and Autumn when the vicissitudes of weather are



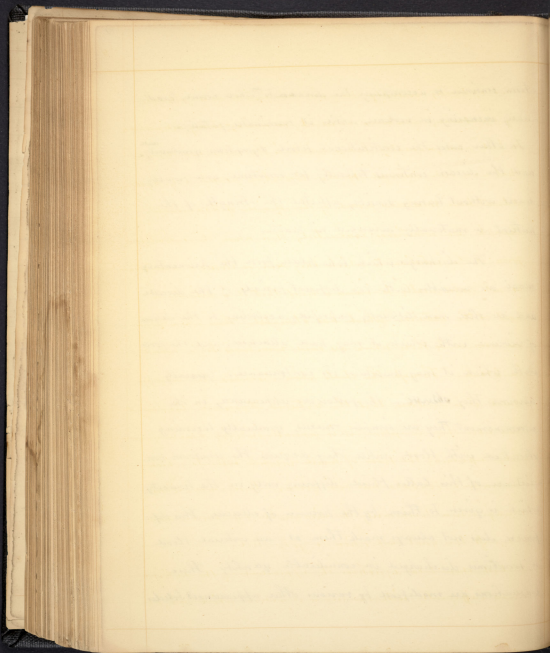
greatest and the putrefaction of Vegetables <sup>rather</sup> most rapid are the periods most favourable to its appearance. An attack is generally ushered in with Chillsings shivering and other symptoms of Pyrexia. These sometimes occur however as symptoms of the local discharge which comes on first. The alimentary canal is affected with considerable constipation and Flatulence, (This is not an invariable symptom, Diarrhea being the first sometimes to make its appearance.) The patient about this time begins to be affected with griping, pain and frequent disposition to go to stool. Though his efforts to produce copious evacuations are generally abortive and attended with a great degree of Tenismus. In conjunction with the above mentioned symptoms, the Stomach which as yet may have been tranquil becomes much disturbed, Anorexia Nausea & vomiting disturb much the comfort of the patient and subject him to much uneasiness. At this time the arterial system has been sympathetically called into action, and there is Pyrexia which is subject to exacerbations and remissions and sometimes assumes the form of a Tertian. These febrile symp-



-tion continue to accompany the disease, <sup>the</sup> whole course, gradually increasing in violence, until it terminates fatally.

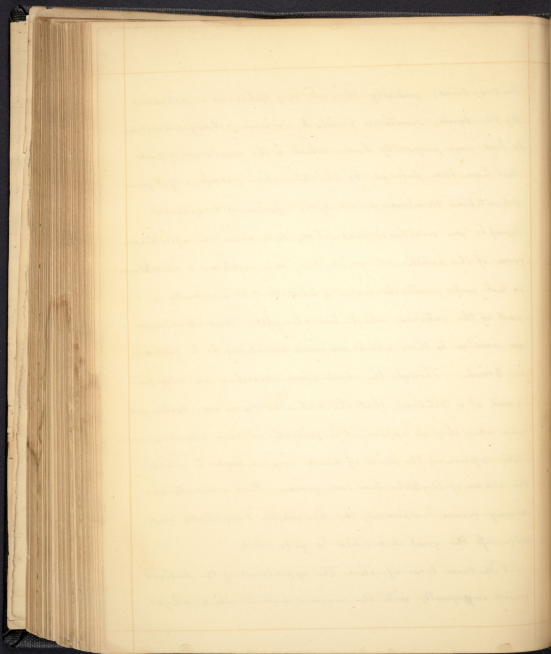
In other cases the constitutional febrile symptoms gradually <sup>cease</sup> and the disease continues topically for sometime, and finally ceases without having sensibly affected the strength of the patient or materially deranged his health.

The discharges which take place from the Alimentary canal are variable, with the different periods of the disease and are still more differently imprefixed, according to the degree of violence with which it may have attacked, and the force with which it may maintain its continuance. Generally however they ~~obscure~~ <sup>obscure</sup> the following appearance, in the commencement they are simple mucus, gradually becoming streaked with blood, until they acquire the uniform consistence of this latter fluid, differing only, in the tenacity which is given to them by the presence of mucus. This difference does not always mark them as pure arterial blood is sometimes discharged in considerable quantity. These evacuations are modified by various other appearances besides



that of blood; generally they are very foetid as is indicated by the smell, sometimes puruloid, or bearing strong resemblance to pus, and frequently Lanes which is the evacuation of parts that have been destroyed by the Ulcerative process, or Gangrene. Adventitious Membranes formed by the effusion of coagulable Lymph are sometimes evacuated, these retain the cylindrical form of the intestine to which they bear so strong a resemblance as not unfrequently to induce a belief that it is actually a part of the intestine which has sloughed, these Abscesses are similar to those which are said sometimes to be found in Gout. Though the stools above described are very frequent, it is seldom, that the natural Feces are discharged and when they do appear, it is generally in very small quantity, assuming the form of small isolated balls to which the name of Scybala has been given. These evacuations always relieve temporarily the disagreeable symptoms, and suppress the great disposition to get stool.

With these local affections the appearance of the patient would vary greatly, with the degree of action which might





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prevail in the general arterial system, should this be more  
-gangrene of all the parts might be induced and death quick-  
-ly terminate the disease, but should it be mild, the local dis-  
-ease need not impress with much fear of danger immediately,  
as it may continue for a considerable time without much  
injury to the patient, But we should never be lulled with  
too much confidence, as there is no security against an exacer-  
-bation of the constitutional symptoms and eventually of  
death. This disease may terminate with a gradual cessa-  
-tion of all the Dysenteric symptoms, or it may degenerate  
into a chronic Dysentery or Diarrhea, which may continue  
for a considerable time and become a source of great annoyance  
to the comfort and ease of the patient, The pulse during  
all this time although the inflammatory symptoms be urgent  
is generally thready and tense, and want of that full rolling  
appearance to the touch, which generally characterizes it in  
similar local affections of other parts or tissues.

Delirium is not a frequent symptom in this disease  
nor at this should we be surprised since the vascularity



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of the Intestine is so great, and the blood so much determined  
to it, as to preclude much action in the brain, The patient  
may sometimes exhibit the symptoms of partial mania, but  
if strict attention be paid, it will be found to proceed from  
the excruciating pain in the alimentary canal, by which  
the functions of the Brain are impaired, and not from any  
inordinate determination of blood to that organ.

The cause of Dysentery of which some have been previously  
mentioned may be divided into two classes, Those which act  
immediately upon the mucous coat of the alimentary canal  
producing the disease directly will constitute the first class.  
While those which act upon the skin producing it indirectly  
will constitute the second class. Contagion as a cause  
of this form of the disease I have previously discarded  
and whether in any of the forms it is ever generated my  
limits will not suffer me to investigate.

To the first of the above mentioned classes, may be referred  
all substances of an indigestible nature whether of Diet or  
of substances accidentally admitted into the Stomach.



It is also upon this organ that Marsh Miasmata are supposed to act. To the second class may be referred more particularly vicissitudes of temperature in the atmosphere, heat succeeded by cold, or any other cause which might interrupt the cutaneous circulation, and cause the blood to flow, with more force or in greater quantity to the internal viscera, In this latter case the redundant blood in lower loci, as it were, would become a source of irritation to the mucous coat, by which a constant determination would be invited to it.

From the great vascularity of the mucous coat of the alimentary canal the modus operandi of this first class of causes may be easily understood, This Membrane is by most Anatomists of the present day supposed to be a continuation of the skin forming the internal coat of most of those cavities which open externally, and to present, nearly similar appearances both in structure and function whenever it occurs, Hence the same mode of action or phenomena <sup>occurs</sup> when a foreign body comes in contact with the membrane lining the interior that does supervene when a similar body



in point of relation is presented to it as it exists in the eye.

There is at once a copious secretion of Mucus or of a watery fluid, which is interposed between the Membrane, and the body thus irritating and is at the same time a species of depletion which is instituted by the vitality of the part in order to relieve itself of congestion. Thus even the duration of the application only tempering the powers of nature would be amply sufficient to obviate disease and the effect would no longer be sensible when the exciting cause was removed, but this not being practicable and the irritation of the part gradually increasing the quantity of blood determined to it becomes augmented. The vessels are enlarged lose their contractile power, and thus is established topical inflammation with which the general arterial system sympathizes and thus is established the disease in question.

The operation of the second class of causes may appear somewhat ~~unintelligible~~, upon a superficial view, but if the demonstration of Bichat previously alluded to be regarded as correct, and the continuity of the vessels and





nerve, of the serous membrane and skin also admitted the principle upon which these causes produce disease is at once developed and rendered easy of explanation. As I shall be under the necessity of again alluding to these two agents in the subsequent part of this paper, I will now enter more particularly into a detail of those changes which take place in the functions and actions of the system in general when exposed to their influence,

Heat and cold appear to produce a topical effect wherever applied and disease results not from any specific power in either or both, but from an inequality induced in the circulation, by which important viscera suffer and the particular disease produced, depends upon the comparative strength of the viscera that which is weakest and least liable to sustain the shock being most liable to be diseased, Hence we sometimes have Catarrhs when the Lungs are most debilitated, and Dysenteries when the Intestines are most deficient powers. Heat I shall consider as a predisposing cause or as creating the internal



viscera by determining the blood from them, to the surface where I suppose it to be applied, cold on the other hand is an exciting cause or acts by determining the blood from the surface to these viscera Thus circumstanced.

The first communicating a centrifugal the latter a centripetal force to the circulation. The phenomena which are observed when the system is exposed to the inordinate action of heat are such as fully to counteract the position which I have stated. In the first place there is an unusual turgescence of the capillary vessels of the skin thus exposed, secondly there is an attempt made by the system to relieve itself of this, by the sweating process, which is instituted and continued so long as defence on its part is necessary against this deleterious agent, deleterious as its direct tendency is to destroy the parts exposed to it,

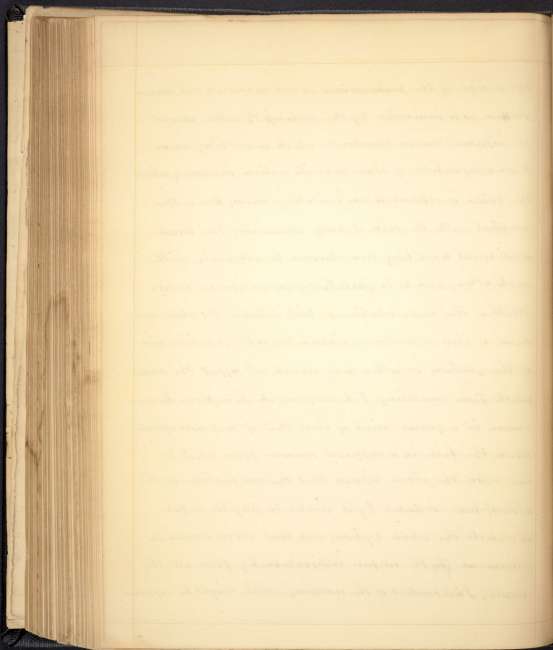
In conjunction with this increased action of the vessels of the skin, it is held by some that the action of all other parts is also increased as in the *Heckings Liver*; but to this I object for two reasons, first that after sweating is once

The first thing I noticed when I stepped  
 out of the car was a warm blanket of  
 sunlight. The air was thick with the scent of  
 blooming flowers, a mix of earthy and sweet  
 aromas. I took a deep breath, feeling the  
 sun on my face and the gentle breeze on my  
 skin. The world around me seemed to be  
 a soft, glowing embrace. I walked slowly,  
 savoring every moment of the peaceful  
 solitude. The path ahead was clear, leading  
 me towards a horizon of endless possibilities.  
 I felt a sense of freedom, a release from  
 the constraints of everyday life. The sun  
 was low in the sky, casting long, golden  
 rays across the landscape. The colors were  
 vibrant, the light was perfect. I knew  
 this was a special moment, one I would  
 never forget. I closed my eyes for a moment,  
 letting the sun kiss my forehead. The world  
 was mine, and I was free.

induce heat does not come in contact with the body  
 but in a very partial degree, and secondly that such  
 an action would be inconsistent with the intelligence  
 of the system. This first assertion might appear ~~app~~  
 somewhat paradoxical to those unacquainted with those  
 principles of Philosophy which are so frequently developed  
 in the Physical<sup>sc</sup>, but as I am now addressing persons  
 not thus circumstanced, I would merely refer to the prin-  
 -ciple of evaporation, which must necessarily be induced  
 by that fluid which is placed between the body and  
 the surrounding medium, by which it will be gradual-  
 -ly and thrown in a latent state into the the atmos-  
 -phere. The truth of this I consider still more apparent  
 from the cooling sensation which is always experienced  
 upon the accession of perspiration, ~~that only in this~~ as  
 Heat is local in as much as it is applied to the skin  
 which is only a part of the membrane formed by it  
 and the mucous membrane, if we irritate a point in  
 the skin we increase the action in that point alone



the action of the parts around is not increased, but diminished as is indicated by the palms &c; neither should the internal mucous membrane which is nothing more than a reflection of skin have its action increased when the latter is exposed to an irritating cause, Nor is this consistent with the facts of daily observation, The Urine and sweat have long been observed to alternate with each other, and to be ~~pro~~relatively in an inverse ratio. Whether the same relation subsists between the skin and Liver is still a matter of dispute, but as the determination of the question in either way would not affect the disease which I am considering I shall waive its discussion. I would observe in a general point of view that if heat does operate upon the Liver in a different manner from what it does upon the other viscera that the rarefaction of the atmosphere induced by it would be profuse so far as respects the whole system, and that blood would be determined ~~to~~ the surface indiscriminately from all the viscera, Independent of the reasoning which might be expended





upon this question, could I deem it proper to enter into, I would only add that there are upon record facts of persons who have been exposed to very intense degrees of heat and kept alive alone by the profuse perspiration, but that no cognizance ~~in~~ <sup>in</sup> ~~the~~ <sup>of</sup> any inordinate secretion of Urine or bile which ought to have been evacuated agreeable to the theory which I am now combating.

Nor do I discard those principles of sympathy which appear to exist and so intimately to connect the different parts of the system but I express its effects in the words of Hippocrates, *Ubi irritatio ibi affluens*, It is by this that the internal parts are propitiated to yield up a part of their ordinary quantity of blood which is thrown out in the form of sweat as a protection to them all. This then is a sympathy upon which is founded a system of economy totally inconsistent with what might be supposed; can't die the whole internal capillary system take on increased action, and thus blindly and happily throw away in the form of Urine or Bile that which

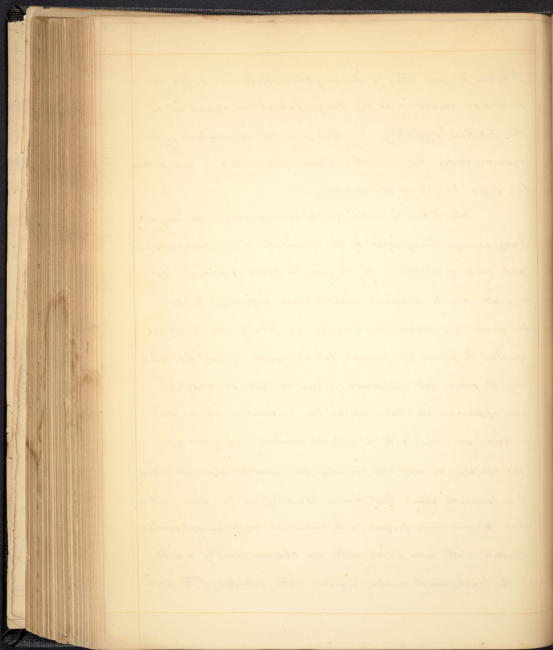


constitutes such an effectual protection when disposed of through the proper outlet. By this means the internal viscera being deprived of their usual quantity of blood which as a stimulus of distention is as essential to their strength, as exercise to the whole voluntary muscular system, fall into a state of collapse, lose their elasticity and <sup>are</sup> thus rendered unable to sustain even the force of the ordinary circulation. In the next place I shall proceed to investigate some of the effects, which are excited by cold upon the healthy system when applied to the surface. In this case the skin assumes a pale colour, and has every appearance of being more closely contracted in its texture, the quantity of blood is increased, and there is ~~no~~ <sup>is</sup> evident a greater quantity of blood determined to most of the viscera. The system being in a healthy state and the strength of all the organs unimpaired no evil consequences would result but if exposed while much excited or after having been much debilitated by previous subjection to heat, disease of some kind would almost inevitably result. Should the liver be reduced to a state of greatest debility



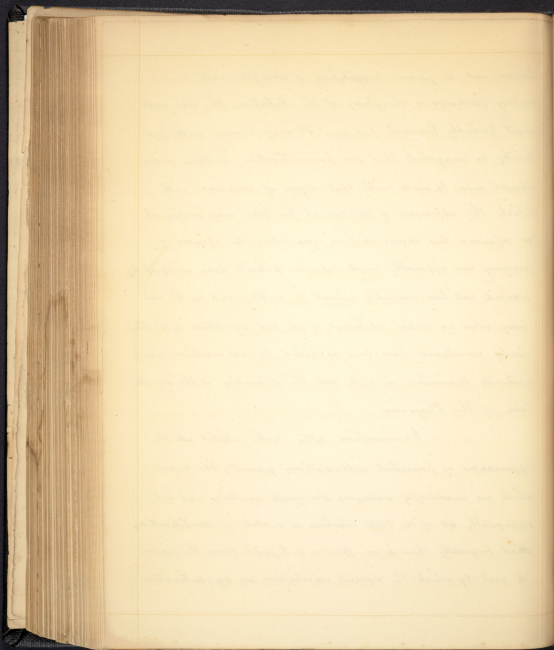
Cholera or some other of its congestive affections would be  
produced, should it be the Tongue Catarrh or should it be  
the Intestinal Dysentery, and it is from this circumstance, of a  
common cause, that the last mentioned disease has by some authors  
been called Catarrh of the Intestines.

This disease is not liable to be confounded with any other  
being always distinguished by the peculiarity of the discharges, pain  
and mode of attack. The Progress is sometimes difficult, but  
may generally be determined without much difficulty. If after  
the disease has continued for sometime, we perceive the discharges  
by stool to become less frequent, but in greater quantities when  
they do occur, and approximate nearer the natural consistence  
and appearance in other respects, the circulation in the skin  
to become more free, with a natural moisture and glow upon  
the surface we may then indulge the most sanguine expectation  
of a favourable issue. But should the stools at the above mentioned  
time become more frequent, and unnatural in their appearance  
attended with more pain, with an abdomen acutely sensible  
to the touch, much swollen together with collapse of the con-



tenance and a general prostration of strength, with thin watery discharges or sloughing of the Intestine, the case will most probably terminate fatally, It may however with propriety be suggested that our prognostication in these cases should never be made with that degree of confidence, with which the appearance of the case at the time may inspire us. as experience has shown that in cases where the chances of recovery were apparently most desperate patients have unexpectedly survived and been completely restored to health, and on the contrary, when an evident abatement of all bad symptoms indicating speedy convalescence, have been succeeded by exacerbation, which eventually terminated in death and the destruction of the reputation of the Physician.

Examinations after death exhibit all the appearances of persistent inflammation, generally the vessels which are exceedingly numerous are much injected, and not unfrequently all of the large intestines in a state of mortification, Most frequently there is an effusion of Lymph from the peritoneal coat by which the different convolutions are agglutinated



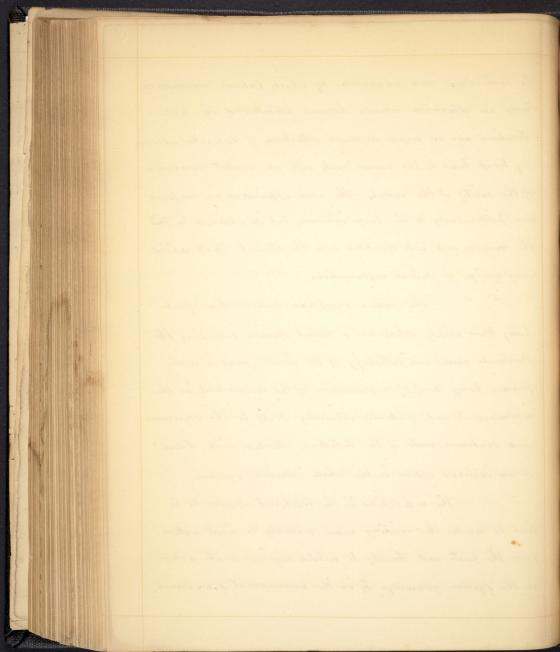


to each other, and ulceration by which lateral communica-  
-tions are established between different portions of the gut.

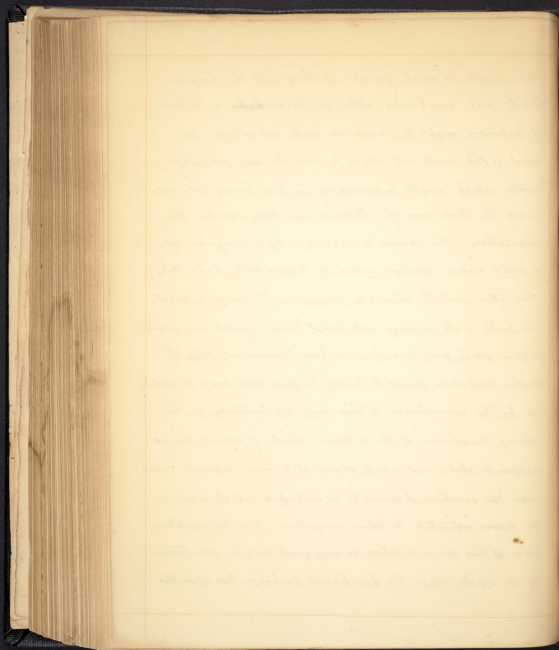
Sometimes also are found numerous collections, of tubercles, adhering  
by broad bases to the mucous coat, with an evident diminution  
of the cavity of the canal. The above appearances are confined  
more particularly to the large intestine, but in addition to this  
the smaller one and sometimes even the stomach itself exhibit  
every vestige of previous inflammation.

The causes, symptoms and morbid effects  
being thus amply delineated a correct opinion respecting the  
Proximate cause and Pathology of the disease may be easily  
formed, being simply inflammation of the mucous coat in the  
commencement, and gradually extending itself to the muscular  
and peritoneal coats of the Intestines, attended with fever  
or an increased action in the whole arterial system.

The indications in the treatment appear to be  
first to remove the exciting cause, secondly to divert action  
from the parts and thirdly to subdue any inordinate action  
in the system generally. If in the commencement of an attack

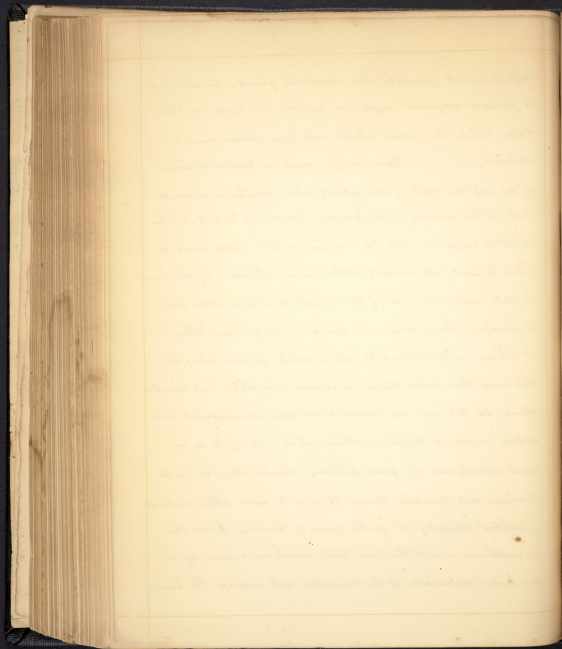


There should be much gastric affection, with the Tongue heavily fur'd, and Emetic either of *Spicaacutuba* or Tartrate of Antimony might be prescribed with advantage. The effect of this would not only be to evacuate any indigestible matter which might be remaining in that viscus, but would divert the blood from the interior, and thus equalise the circulation. This should be succeeded by a purgative of a mild nature, consisting either of Epsom salts, Sweet Oil, The latter probably should be preferred, as it would lubricate the parts in its passage and protect them against any acid matter which may probably have been thrown out. Why the milder purgative should be preferred in these cases may be explained by the circumstance of their being less irritating, to the living membrane of the intestine which is already in an inflamed state, and which should it be much increased would cause the secretion of mucus to be suppressed, which is one of the means instituted to relieve congestion. That the depletion here of this mucus secretion is very great, may be illustrated by the effects which the Leucorrhoeal discharge has upon the

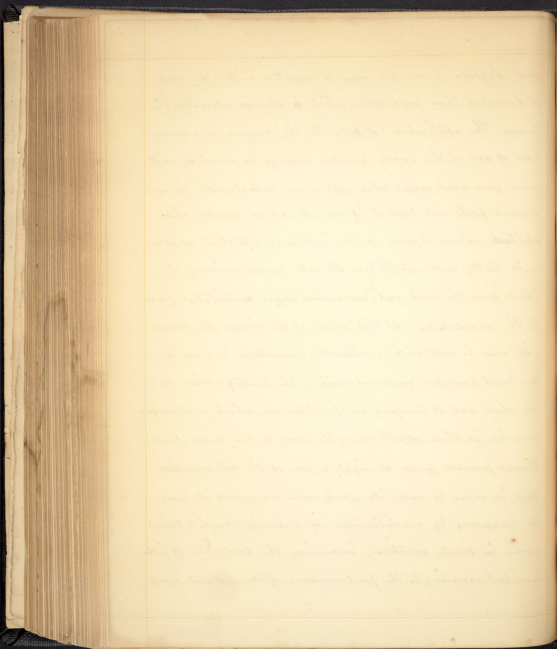


vessels, which furnish the menstrual fluid, hence in order to produce congestion sufficient for the discharge of this latter fluid, the former which acts as a drain must be obviated,

This simple mode of treatment aided by care on the part of the patient, will sometimes be sufficient to the removal of an attack, but should it not at other times be sufficient, and the arterial system become much excited beyond its natural action, as is indicated by the hard, chorded pulse. The aid of the lancet should be called into requisition, blood should be drawn in large quantities at a time, as it is found to afford much greater relief in this way than when taken in a smaller quantity and repeated often. In this way we prevent structural derangement, and seldom induce a Typhoid state, which appears to be so much apprehended by some authors. Should there be much *Tormenta* and *Tenismus Oesoph.* should be given either in moderate quantities internally, or in the form of Enema. From the circumstance also of this pain being sometimes caused by a spasmodic contraction of the Muscular coat around the hard-

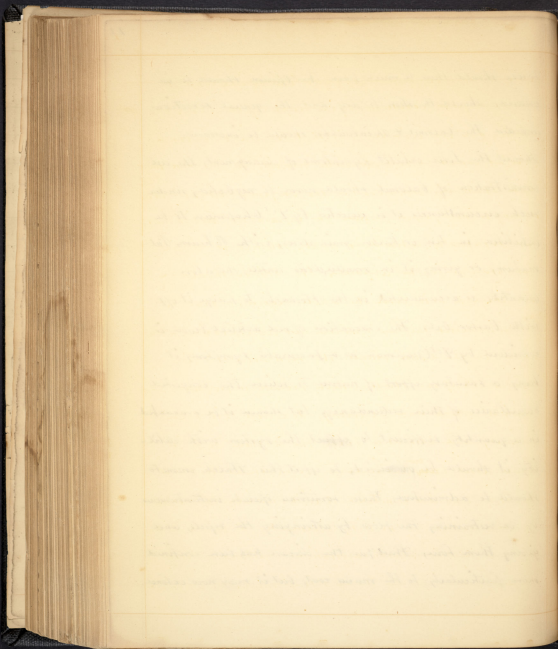


and Strychnia Castor Oil may be repeated with the view of promoting their evacuation, which ~~is~~ always alleviates the pain. The application of Cold to the surface, in inflammation of any of the Viscera, should always be avoided, as it never does good except when applied in contact with the inflamed part, but that it is an efficacious remedy when applied as an Enema to the inflamed intestine appears to be pretty well established, It acts by determining the blood from the part, and <sup>by</sup> communicating a centripetal force to the circulation. At this stage of the disease the warm bath may be used with considerable advantage, it is one of the most powerful means of exciting the healthy action of the skin, and of bringing on Diaphoresis, which is always desirable in these affections. To produce this same effect Dover's powders given at night is one of the best remedies and in order to render its effects more permanent it may be succeeded, by a combination of Calomel, Opium, & Spica natha in small quantities, increasing the proportion of either ingredient according to the predominance of the different symp-

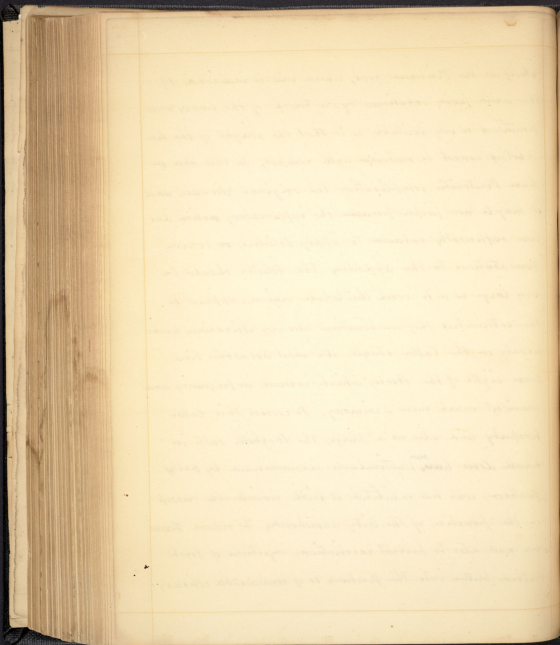




-Fores, should there be much pain The Opium should be in-  
 creased, should the skin be dry and the general secretions  
 impeded the Calomel & Spicacuanha should be increased.  
 Should the Liver exhibit symptoms of derangement, the ad-  
 ministration of Calomel should never be neglected, under  
 such circumstances it is directed by Dr. Chapman to be  
 exhibited in Ten or twelve grain doses, with Rheum Pal-  
 matum, or giving it in smaller doses until the above  
 quantity is accumulated in the Stomach to purge it off  
 with Castor Oil. The evacuation of red arterial blood is  
 considered by Dr. Chapman as a favorable symptom, it  
 being a salutary effort of nature to relieve the congested  
 capillaries of their redundancy, but should it be evacuated  
 in a quantity sufficient to ~~effect~~ affect the system with debil-  
 -ity it should be ~~prevented~~ prevented, To effect this Starch emulsi-  
 on should be administered, These sometimes operate instantane-  
 -ly in restraining the flow by astringing the vessels, once  
 giving them tone, Thus far the disease has been confined  
 more particularly to the mucous coat, but it may now extend



itself to the Peritoneal coat, which will be indicated by the acute pain, occasioned by the touch of the hands and sometimes so very irritable is it that the weight of the bed-clothing cannot be sustained with comfort, In this case we have Peritonitis complicating the original disease, and it may be now proper provided the inflammatory action has been sufficiently subdued to apply, Blisters, or Warm fomentations to the Abdomen. The Blister should be very large so as to cover the whole region, applied to the cutaneous. They are sometimes also very efficacious, particularly in the latter stages. We must not at this time lose sight of the Stools, which increase in frequency and manifest much more acrimony, To correct this latter property and also as a purge, the Rochelle salt in small doses <sup>sum</sup> ~~has~~ particularly recommended by Dr. Jackson, who has exhibited it with considerable success in the practice of the City Almshouse, To relieve Fermina and also to prevent excoriations, injections of fresh melted butter into the Rectum is of considerable efficacy.



The mucilaginous drinks as Gum Arabic, ~~the slippery Elm~~  
 and Senna dissolved in water should be freely administered  
 these aided by the lancet constitute the chief remedies  
 of many of the Southern physicians, these derive most of  
 their alleged specific properties from the circumstance  
 of their being a diet sufficient to nourish the patient  
 without affording much feculent matter to pass into  
 the large intestines and thus increase their excitement

Should the disease thus treated manifest no disposition  
 to yield, but the symptoms all become aggravated, with  
 general prostration, cold extremities &c. Blisters to the wrists  
 and ankles aided by the application of hot Brecks.  
 should be continued, together with the flannel rollers  
 surrounding the whole chest and abdomen, The Carbamate  
 Ammonia, Wine Whey and Spt of Turpentine should be  
 exhibited internally, this latter remedy is said sometimes  
 to operate as a charm at this period, it is both a  
 local & a diffusible stimulus, and while it relieves the  
 capillaries communicates force to the general arterial system

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the sixtieth is the fact that the  
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the seventieth is the fact that the  
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the ninety-ninth is the fact that the  
the hundredth is the fact that the

should these measures fail the Mercurial preparations  
 should be resorted to tillivation, which when induced  
 rarely fails to arrest the further progress of the disease

